## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10820313

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
Γ=/	OTAL CLAIMS		(Column 1)		(Con	Column 2)		TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			11				. ↓	RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			)   minus 20=		•		4	XS 9=		OR	X\$18=	
INDEPENDENT CLAIMS			4 minus 3 =					X43=		OR	X86=	88
MULTIPLE DEPENDENT CLAIM PRESENT							J	+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in a						column 2		TOTAL		OR	TOTAL	\$076
CLAIMS AS AMENDED - PART II										_	OTHER	THAN
5/2/05 (Column 1) (Column 2) (Column 3						<u> </u>	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMĘNT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 10	Minus	**	20	=	<b>↓</b>	-X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF MI	Minus	PENDENT	CLAIM		f ig[	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=	-	OR	+290=	
								TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		,				NOOTI, FEET						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		= .	] [	X\$ 9=		OR	X\$18=	<u>' - '</u>
	Independent		Minus	***		= .	]	X43=		OR	X86=	-
	FIRST PRESENTATION OF MI		CHPLE DEPENDENT		CLAIM [		<b>1</b>	+145=		OR	+290=	
	1111			•			<b>-</b>	TOTAL DDIT. FEE		OR ,	TOTAL	
		(Column 1)		(Colum	n 2)	(Column 3)			. •	•	WUII. FEEL	•
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	lF	X\$ 9=		OR	X\$18=	
			Minus	***		p.	╽┝	X43=			X86=	
<u>`</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X-10-		OR	700 <u>=</u>	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												